



Atty. Dkt. No. 051009-0119

1772
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Ulrich DELIUS
Title: POLYAMIDE BASED SAUSAGE
SKIN WHICH CAN BE FILLED
MANUALLY
Appl. No.: 09/284,024
Filing Date: 04/06/1999
Examiner: S. Hon
Art Unit: 1772

AMENDMENT TRANSMITTAL

RECEIVED
SEP 03 2002
TC 1700

Commissioner for Patents
Washington, D.C. 20231

Sir:

Transmitted herewith is an amendment in the above-identified application.

- ☐ Small Entity status under 37 C.F.R. § 1.9 and § 1.27 has been established by a Small Entity statement previously submitted.
- ☐ Small Entity statement is enclosed.
- ☒ The fee required for additional claims is calculated below:

	Claims as Amended	Previously Paid For	Extra Claims Present	Rate	Additional Claims Fee
Total Claims:	16	20	0	x \$18.00	\$0.00
Independents:	2	3	0	x \$84.00	\$0.00
First presentation of any Multiple Dependent Claims:				+ \$280.00	\$0.00
CLAIMS FEE TOTAL:					\$0.00

- ☒ Applicant hereby petitions for an extension of time under 37 C.F.R. § 1.136(a) for the total number of months checked below:

<input type="checkbox"/>	Extension for response filed within the first month:	\$110.00	\$0.00
<input checked="" type="checkbox"/>	Extension for response filed within the second month:	\$400.00	\$400.00
<input type="checkbox"/>	Extension for response filed within the third month:	\$920.00	\$0.00
<input type="checkbox"/>	Extension for response filed within the fourth month:	\$1,440.00	\$0.00
<input type="checkbox"/>	Extension for response filed within the fifth month:	\$1,960.00	\$0.00
EXTENSION FEE TOTAL:			\$400.00
CLAIMS AND EXTENSION FEE TOTAL:			\$400.00
<input type="checkbox"/>	Small Entity Fees Apply (subtract ½ of above):		\$0.00
TOTAL FEE:			\$400.00

- ☐ Please charge Deposit Account No. 19-0741 in the amount of \$400.00. A duplicate copy of this transmittal is enclosed.
- ☒ A check in the amount of \$400.00 is enclosed.
- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date August 29, 2002

By P. D. Strain

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AMENDMENT AND REPLY UNDER 37 C.F.R. § 1.111

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Washington, D.C. 20231

Sir:

This communication is responsive to the Office Action dated March 29, 2002, concerning the above-referenced patent application.

REMARKS

Applicants acknowledge receipt of an Office Action dated March 29, 2002. This response is believed to be timely in view of the petition for a 2 month extension of time filed concurrently herewith. Claims 1-14 are pending in the application. Claims 12-14 have been withdrawn from consideration by the PTO.

Reconsideration of the present application is respectfully requested in view of the following remarks.

Restriction Requirement Under 35 U.S.C. §121 and 372

In response to the restriction requirement set forth on pages 2 and 3 of the outstanding Office Action. Applicants elect Group I, claims 1-11, 15 and 16, without traverse, for further prosecution. Applicants currently have no record of having filed claims 15 and 16 in the application and request that the PTO contact the undersigned to discuss these claims and the paper in which they were introduced.